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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10789,272
	Filing Date	February 27, 2004
	First Named Inventor	Elaine W. JIN et al.
	Art Unit	2624
	Examiner Name	John W. Lee
	Attorney Docket Number	86387JDP
Total Number of Pages in This Submission		30

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Firm Name	Davis Bujold & Daniels, P.L.L.C.		
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Printed name	Scott A. Daniels		
Date	September 17, 2008	Reg. No.	42,462

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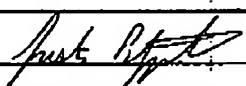
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### AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

In re Application of: <b>Elaine W. JIN et al.</b>									
Application No. <b>10/789,272</b>									
Filed: <b>February 27, 2004</b>									
Title: <b>STEREOSCOPIC DISPLAY SYSTEM WITH FLEXIBLE RENDERING OF DISPARITY MAP ACCORDING TO THE STEREOSCOPIC FUSING CAPABILITY OF THE OBSERVER</b>									
Attorney Docket No. <b>86387JDP</b>	Art Unit <b>2624</b>								
<p>The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. (Note: pursuant to 37 CFR 10.57(c), a practitioner cannot authorize other registered practitioners to conduct interviews without consent of the client after full disclosure.) Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:</p> <table border="1"> <thead> <tr> <th>Name</th> <th>Registration Number</th> </tr> </thead> <tbody> <tr> <td><b>Michael J. Bujoled</b></td> <td><b>32,018</b></td> </tr> <tr> <td><b>Scott A. Daniels</b></td> <td><b>42,462</b></td> </tr> <tr> <td><b>Gary D. Clapp</b></td> <td><b>29,055</b></td> </tr> </tbody> </table>		Name	Registration Number	<b>Michael J. Bujoled</b>	<b>32,018</b>	<b>Scott A. Daniels</b>	<b>42,462</b>	<b>Gary D. Clapp</b>	<b>29,055</b>
Name	Registration Number								
<b>Michael J. Bujoled</b>	<b>32,018</b>								
<b>Scott A. Daniels</b>	<b>42,462</b>								
<b>Gary D. Clapp</b>	<b>29,055</b>								
<p>This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.</p>									
SIGNATURE of Practitioner of Record									
Signature 	Date <b>7/27/2008</b>								
Name <b>Justin D. Petruzzelli</b>	Registration No., if applicable <b>52,118</b>								
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